

Provider Inspection Summary
For the period 07/01/2003 to 06/30/2006
Adult Family Home

Facility Information

Facility Name: CLARK PLACE RIVERSIDE (390044)

Address: 506 JANTE DR, BURLINGTON, WI 53105

License Status: REGULAR

Licensed/Certified/Registered 10/30/1995

Regional Office: SOUTHEASTERN REGION (MILWAUKEE), (414) 227-2005

Survey History

Survey ID: 0096454 **End Date:** 01/30/2006 **Type:** OTHER **Purpose:** SELF REPORT

Results: STATEMENT OF DEFICIENCY ISSUED

Statement of Deficiency: #10008898 Served 03/07/2006

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
88.04(2)(f)	CONDITION WHICH REPRESENTS RISK OR HARM		

Survey ID: 0094254 **End Date:** 02/18/2005 **Type:** STANDARD **Purpose:** SURVEY

Results: ENFORCEMENT ACTION

Statement of Deficiency: #10009072 Served 03/12/2005

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
50.065(2)(b)intro	ENTITY BACKGROUND CHECK REQUIREMENTS	12/13/2005	Yes
88.05(3)(a)	HOME ENVIRONMENT	12/13/2005	Yes
88.05(3)(d)	ANNUAL WELL WATER INSPECTIONS	12/13/2005	Yes
88.05(3)(e)2.b	INSPECTIONS-GAS FURNACE	12/13/2005	Yes
88.05(4)(d)2.b	FIRE EVACUATION ANNUAL EVALUATION	12/13/2005	Yes
88.05(4)(d)2.c	SEMI-ANNUAL FIRE DRILLS	12/13/2005	Yes
88.06(3)(f)	REVIEW OF ISP	12/13/2005	Yes

Disclaimer: This information is provided as a public service by the Wisconsin Department of Health and Family Services (DHFS). The Department neither endorses any facility nor guarantees that this information is accurate, up-to-date, or complete. This information, which should not be used as a sole source in selecting a facility, does not replace official information sources.

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Survey ID: 0094039 End Date: 02/04/2005 Type: OTHER Purpose: DESK REVIEW

Results: NO STATEMENT OF DEFICIENCY ISSUED

Survey ID: 0094040 End Date: 02/04/2005 Type: OTHER Purpose: DESK REVIEW

Results: NO STATEMENT OF DEFICIENCY ISSUED

Survey ID: 0091718 End Date: 12/03/2003 Type: OTHER Purpose: COMPLAINT

Results: ENFORCEMENT ACTION

Statement of Deficiency: #10008645 Served 12/24/2003

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
50.065(2)(b)intro	ENTITY BACKGROUND CHECK REQUIREMENTS	12/13/2005	Yes

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Enforcement History

Date: 03/10/2005	SOD #10009072	Appealed: No
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Sanctions

COMPLY WITH DEPARTMENT PLAN OF CORRECTION
COMPLY WITH REQUIREMENT

Date: 12/23/2003	SOD #10008645	Appealed: No
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Sanctions

OTHER SANCTION

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